



Massachusetts Department of Environmental Protection
Bureau of Air and Waste – Stage I Vapor Recovery Program

MassDEP Facility Account # _____

Stage I Form E

New Stage I System Owner, Lessee, Operator or
Controller Notification

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



DEP USE ONLY
/ /
Date Postmarked

A. New Stage I System Documentation

1. Former Stage I Facility Documentation (facility name currently on record in MassDEP Stage II database)

Former Name of Facility Where the Stage I System is Installed

Facility Address

City/Town

MA

State

Zip Code

2. New Stage I Facility Documentation

If the **facility name** where the Stage I System is located has changed, please provide the new facility name and address information below. If not, please continue to Section B.

New Name of Facility Where Stage I System is Located

Facility Address

City/Town

MA

State

Zip Code

B. New Stage I System Responsible Official Documentation

1. Has the **name or mailing address** of the Stage I System Responsible Official #1 **or** #2 on record in the MassDEP Stage II database changed? ☐ Yes ☐ No

- If **YES**, please provide the new Stage I System Responsible Official contact information below.
- If **NO**, please continue to Section C.

a. Stage I System Responsible Official #1 (point of contact for Stage I related correspondence):

Name of New Stage I System Responsible Official #1

Phone Number

Mailing Address

City/Town

State

Zip Code

Email Address

b. Stage I System Responsible Official #2 (fill out only if applicable):

Name of New Stage I System Responsible Official #2

Phone Number

Name of Company or Facility

Mailing Address

City/Town

State

Zip Code

Email Address



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B. New Stage I System Responsible Official Documentation (cont.)

2. Source of Authority for each new Stage I System Responsible Official (RO), as applicable.
Please check only **one** box for each RO.

If a Corporation, an official with authority to bind the Corporation:

	RO #1	RO #2		RO #1	RO #2
President	<input type="checkbox"/>	<input type="checkbox"/>	Vice President	<input type="checkbox"/>	<input type="checkbox"/>
Secretary	<input type="checkbox"/>	<input type="checkbox"/>	Other person who performs a similar	<input type="checkbox"/>	<input type="checkbox"/>
Treasurer	<input type="checkbox"/>	<input type="checkbox"/>	policy-making or decision-making function		
			of the Corporation		

If a Partnership, a general partner

☐ ☐

If a Sole Proprietorship, the proprietor

☐ ☐

If a Trust, a trustee

☐ ☐

If a Limited Liability Company, an authorized person

☐ ☐

If a municipality/public agency, a principal executive official or ranking
elected official with authority to enter into contracts on behalf of the
municipality/public agency.

☐ ☐

Important: Please provide the **effective date** each **new Responsible Official** assumed his/her responsibilities, as applicable.

RO #1: ____ / ____ / ____

RO #2: ____ / ____ / ____

C. New Annual Stage I System Compliance Fee Billing Documentation

1. **Stage I Annual System** Compliance Fee Billing Documentation:

- a. Has the **name of the company** paying the Annual Compliance Fee on record in the MassDEP database changed? ☐ Yes ☐ No
- b. Has the company **mailing address** and/or **dept., division, etc.**, on record in the MassDEP database changed? ☐ Yes ☐ No
- If you answered **YES** to either C.1.a. or b. above, please fully complete C.2. below.
 - If you answered **NO** to both C.1.a. and b. above, please continue to Section D.

2. **New Annual Stage I System Facility** Compliance Fee Billing Documentation:

Name of Dept, Division, etc, otherwise leave blank. Please do **not** indicate contact name.

Phone Number _____

Name of Company (Corp., Co., Inc., LLC, etc.) _____

Federal Employer ID # - FEIN _____

Mailing Address _____

City/Town _____

State _____

Zip Code _____

Important: Please provide the **effective date** the **new company** assumed responsibility for paying the Annual Compliance Fee.

____ / ____ / ____



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D. Underground Storage Tank (UST) Ownership Information

1. Are the **Stage I Responsible Officials** noted in B. 1. above also the **new owners of the underground storage tanks (USTs)**? ☐ Yes ☐ No
2. If **YES**, have you registered the USTs under your ownership in the MassDEP UST Online Filing Data Management System? ☐ Yes ☐ No

If **NO**, you are required to register the USTs under your ownership in the MassDEP UST Online Filing Data Management System within 30 days. The UST data management system can be accessed at the following UST program website link: <http://www.mass.gov/eea/agencies/massdep/toxics/ust/>

E. Stage I System Responsible Official Compliance Certification

1. Stage I System Operation & Maintenance, Training, and Weekly Inspections

- a. Have you obtained and reviewed the applicable CARB Executive Orders or manufacturers' guidance for your Stage I system to ensure correct operation and maintenance of your Stage I system?
☐ Yes ☐ No

If **NO**, CARB Orders are available at: <http://www.arb.ca.gov/vapor/eo-evrphase1.htm>

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2

- b. Have you obtained and reviewed **MassDEP's Stage I Weekly Inspection & Compliance Guidance Manual**? ☐ Yes ☐ No

If **NO**, Guidance Manuals are available at:

<http://www.mass.gov/eea/agencies/massdep/air/programs/stage-ii-vapor-recovery.html>

The MassDEP Stage I Weekly Inspection & Compliance Guidance Manual provides guidance and training for conducting the required visual inspections.

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2

- c. Are you in compliance with the requirement that all **persons** conducting visual inspections of the Stage I System are **trained** to operate and maintain the Stage I system in accordance with the manufacturers' guidance?
☐ Yes ☐ No

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2

- d. Are you in compliance with the requirement that the **Stage I system** must be **visually inspected** once every **seven** days?
☐ Yes ☐ No

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2



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E. Stage I System Responsible Official Compliance Certification (cont)

- e. Are you in compliance with the requirement that upon determining during a **visual inspection** that a Stage I system component is incorrectly installed, non-functioning or broken, the owner/operator of a motor vehicle fuel dispensing facility shall:
1. Immediately repair or replace the components with CARB Enhanced Vapor Recovery (EVR) components (except coaxial components and slip-on spill buckets may be non-EVR) and install them in accordance with applicable Executive Orders and manufacturers guidance; **or**
☐ Yes ☐ No
 2. If repairs or replacements cannot be made immediately, repair or replace the components within 30 days of the visual inspection date; **or**
☐ Yes ☐ No
 3. If the components cannot be repaired or replaced within 30 days of the visual inspection date, the transfer of motor vehicle fuel into the motor vehicle fuel storage tanks equipped with the incorrectly installed, non-functioning or broken components is prohibited until the components are repaired or replaced?
☐ Yes ☐ No

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2

2. Stage I Testing – Failed Tests

- a. Are you in compliance with the requirement that if a Stage I facility **fails** one or more required **Annual In-Use Compliance tests** you are required to:
1. Immediately repair or replace the components with CARB Enhanced Vapor Recovery (EVR) components (except coaxial components and slip-on spill buckets may be non-EVR) and install them in accordance with the applicable Executive Orders and manufacturers guidance; **and**
 2. Continue to re-test until each failed test is passed and submit an Annual In-Use Compliance Certification on or before the facility's annual certification submittal due date or within 30 days of the date of the first passing test result, whichever occurs first; **or**
☐ Yes ☐ No If **NO**, proceed to a.3.
 3. If the Stage I system failed one or more required in-use compliance tests and the system could not be repaired as required with a.1. & 2. above, **cease** the transfer of motor vehicle fuel into the motor vehicle fuel storage tanks equipped with the failing Stage I system until the system was repaired in accordance with the applicable CARB Executive Orders and manufacturers' guidance and all applicable compliance testing was conducted and passed.
☐ Yes ☐ No

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2



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E. Stage I System Responsible Official Compliance Certification (cont)

3. Stage I System Record Keeping

Are you in compliance with the requirement that the following records are to be maintained on-site in a centralized location in either hard copy or electronic format?

- a. All of the weekly inspection checklists for the prior rolling twelve-month period.
- b. A copy of the compliance testing company test results for compliance tests performed during the prior rolling twelve-month period.
- c. A copy of the Stage I system's most recent In-Use Compliance Certification or, if more recent, a copy of the Stage I system's Installation/Substantial Modification Certification.
- d. Training Log of all persons trained to perform visual inspections of the Stage I System.

☐ Yes ☐ No

Stage I System Responsible Official attesting to compliance status ☐ #1 ☐ #2

4. Stage I System Responsible Official Compliance Certification Statement

I certify that, where I have indicated that I am the Stage I System Responsible Official, **(a)** I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment; **(b)** systems¹ to maintain compliance are in place at the facility and will be maintained for the coming year even if the processes or operating procedures are changed over the course of the year; and, **(c)** I am fully authorized to make this attestation on behalf of the facility.

Printed Name of Stage I Responsible Official #1

Signature of Stage I Responsible Official #1

Date

Printed Name of Stage I Responsible Official #2

Signature of Stage I Responsible Official #2

Date

¹ For purposes of this statement, "systems to maintain compliance" means procedures that the Stage II facility owner and/or operator has established to ensure that weekly visual inspections and required tests are conducted, that broken or defective components are repaired or replaced and that required records are maintained.